

Screening Recommendations

for WOMEN AGES 20-39



Healthy women, strong communities

Screening Suggestions *to* Help You Take Charge *of* Your Health

Cardiovascular Health

<i>TEST</i>	<i>HOW OFTEN</i>
Blood Pressure	Every two years
Cholesterol	Every five years, unless elevated

Breast and Cervical Health

Breast Self Exam	Every month
Clinical Breast Exam	Every year
Pap Smear	Every year, until you have had three satisfactory tests, then at your health care provider's discretion
Pelvic Exam	Yearly
Sexually Transmitted Diseases (STDs) ..	Whenever you engage in risky behavior

Other Preventive Measures

Skin Self Exam	Every month
Clinical Skin Exam	Every three years
Eye Exam	At least once between puberty and age 40
Hepatitis B	Once, for at-risk individuals
Tetanus Booster	Every ten years

This information is intended for educational use only. The OWH recommends consulting your health care provider for more information.

Source: www.4woman.gov/screeningcharts/

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